

# Form M-706NR Massachusetts Nonresident Estate Tax Return and Domicile Affidavit

Rev. 12/02

Massachusetts

**Department of** 

ENT OF	siale Tax nell	urn and Domicile Affic	iavit	Revenue
o be used only for estates of non	residents with dates of dea	ath on or after Jan. 1, 1997 and prior to Jar	n. 1, 2003. 🗌	Check if amended return
Decedent's first name and middle initial	Last name	Date of death  ▶	Social Secu	rity number
Street address of residence or domicile at	time of death	City/Town	State	Zip
Probate court	Docket number	Check if previously filed: ►		
Tobale Court	Docket Humber	Form M-4422 Form M-476	8 🗌 Form M-	-4768A
Name of executor(s) (see instructions)			Designation	
Street address		City/Town	State	Zip
Name of attorney(s) representing the estat	e (if any)		Telephone	
Street address		City/Town	State	Zip
Attach a copy of the federal estate	tax return, U.S. Form 706,	nt Decedent with Massachuse including all schedules and exhibits.	-	
•	·	nt from U.S. Form 706		
	ngible personal property in Netts property or identify on a	Massachusetts▶3		
4 Percentage of estate in Massach	usetts. Divide line 3 by line	1	c	%
		4		5
		dates and amounts)		6
8 Refund. Subtract line 5 from the	total of line 6 and line 7	· · · · · · · · · · · · · · · · · · ·		8
, ,	monwealth of Massachusetts	3	▶	9
	:. interest ⊅►	, Penalty \$►		
Power of Attorney				
(We) hereby appoint the undersigne Massachusetts Department of Reven Strike any of the following that are	ed nominee, subject to writte ue (DOR), to receive confide e not granted.)	Ch. 62C, s.21 and Power of Attorney.  n revocation, as attorney(s)-in-fact to represent the ential information and to perform on my (our) leads to the ential information and the perform on my (our) leads to the entire transfer of	pehalf the follow	•
		of any refund of Massachusetts taxes, penalt		
		ing the statutory period for assessment or col	lection of taxes	
To delegate authority or to substitu	ute another representative.			
Other acts (specify):				
<u> </u>	ten communications address	sed to the taxpayer(s) in proceedings involving	-	rate to:
lame			Telephone	
Street address		City/Town	State	Zip
Signature of nominee	Date	Signature of executor, administrator, etc	c. Date	
Under penalties of perjury, I declare	that to the best of my know	ersonally liable for transfers of estate assets by tedge and belief this return and enclosures	are true, correc	
Signature(s) of executor(s), administrator(s	s), etc.		Date	
Pignature and address of proparer other th	an the executor(s) etc	DTIN or CCN	Data	

#### **Domicile Affidavit**

This affidavit must be submitted in nonresident cases. It must be completed and sworn to by the surviving spouse or member of the immediate family of the decedent having personal knowledge of the facts; or, if such spouse or member of the immediate family does not possess such knowledge, then it must be submitted by some person having such personal knowledge. The affidavit must also be sworn to and signed by the executor, administrator or person having actual or constructive possession of the property, if any.

Eve	Every question must be answered. Write "not applicable" or "none," if necessary.			
Dec	Decedent's name	Decedent's Social Security number		
bas	The undersigned,, under penalogue of the facts set forth herein, for the purpose of establishing the place of	decedent's domicile at the date of death:		
1	1 a Place where decedent was domiciled at date of death (city and state or country)			
	<b>b</b> Year domicile established			
2	2 a Place of decedent's death			
	(Attach copy of death certificate) Home, hospital, etc. City/To	wn State		
	<b>b</b> Place of burial			
	c Residence address at death			
	d Date and place of birth			
3	3 What is your relationship to decedent?			
4 What are the names and residence addresses of decedent's surviving spouse and members of the immediate family including children parents? If none of the above, list brothers and sisters.				
	(Attach separate listing if necessary.)			
5	<b>5</b> Did the decedent leave a will? □Yes □No. If yes, name the court(s) which admitted the will to prand also the court(s) which allowed ancillary administration.	robate, the docket number, the date admitted		
	(Attach an attested copy of the will and petition for probate of will listing the heirs at law	w unless filed previously.)		
6	6 If the decedent did not leave a will, has an administrator of the estate been appointed? ☐ Yes ☐ N administrator or ancillary administrator and indicate the date of appointment for each.			
	(Attach an attested copy of the petition for administration listing the heirs at law un	uloca filod proviously		
7	7 Did the decedent ever live in Massachusetts?   Yes   No. If yes, during what period(s)?	iless liled previously.)		
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8	8 Indicate the address, nature of decedent's places of residence (e.g., house rented or owned, apar lengths of periods outside Massachusetts during the five years preceding death.	tment, hotel or home of relatives or friends) and		
9	Indicate the address, nature of decedent's places of residence and lengths of periods in Massachu	usetts during the five years preceding death.		
40	Mhara and in what ways did the decadant yets as register to yets during the five years preceding	deathO		
10	10 Where and in what years did the decedent vote or register to vote during the five years preceding	deam?		
11	To what state, county or municipality and in what years did the decedent pay a tax on income, real five years?	estate, or on intangible property during the last		
	Por which taxable year did the decedent last file a Massachusetts income tax return?			
13	13 In what office(s) of the Internal Revenue Service did the decedent file his federal income tax return was stated therein to be the decedent's residence?	ns during the five years preceding death? What		

14	What was the decedent's occupation in the five years preceding death?
	Give name and address of employer. If self-employed, indicate same; if in partnership, give the name and address of the firm and the individual partners. If decedent owned a business, give details.
15	Did the decedent make application for a passport within the last five years? ☐ Yes ☐ No. If yes, give date(s) and place(s) and home address on application.
16	Did the decedent at any time during the five years preceding death execute a will, codicil, trust indenture, deed, mortgage, lease or any other document in which decedent was described as a resident of Massachusetts?   Yes  No. If yes, describe such document and state what residence address(es) were set forth therein.
17	Was the decedent a party to any legal proceeding in Massachusetts during the last five years? ☐ Yes ☐ No. If yes, what was the tribunal, date and type of action?
18	Did decedent belong to any church, lodge, or other social, fraternal or religious club or organization in Massachusetts?   Yes  No. If yes, give name, address, positions held, membership status, etc.
19	Did the decedent maintain a safe-deposit box or bank accounts in Massachusetts at any time during the five years preceding death?  ☐ Yes ☐ No. If yes, give name and address of bank(s). Who, other than the decedent, was authorized to open the box or make withdrawals?
20	Did the decedent hold a Massachusetts driver's license at any time during the five years preceding death? ☐ Yes ☐ No. If yes, give dates.
21	Was an automobile registered in the decedent's name in Massachusetts at any time within five years preceding death? ☐ Yes ☐ No. If yes, give dates.
22	Did the decedent undergo medical treatment or examinations, or was the decedent hospitalized in Massachusetts at any time within five years preceding death?   —Yes —No. If yes, please furnish names and addresses of the attending physicians and dates admitted or examined.
23	Did the decedent within five years prior to death indicate Massachusetts as home or residence on any government, employment, or similar form?   Yes  No. If yes, provide explanation.
24	Has question of domicile been raised in any jurisdictions for any purpose, i.e. income tax, in the last five years? □Yes □No. If yes, state where, what facts were disclosed and what decision was reached.
25	What other information do you desire to submit in support of the contention that the decedent was not domiciled in Massachusetts at the time of death?
	If more space is needed, attach additional sheets of the same size.
	der the penalties of perjury, I declare this affidavit has been examined by me and is, to the best of my knowledge and belief, true, correct complete.
	ature of surviving spouse, etc., having personal knowledge of the foregoing  Date
Sign	ature of executor or administrator (or person with actual or constructive possession)  Date

### Form M-706NR Instructions

## **General Information Major Estate Tax Law Change**

Effective for dates of death on or after January 1, 1997 and prior to January 1, 2003, the Massachusetts estate tax is imposed only on those estates that are subject to federal estate tax filing requirements. M.G.L. c. 65C, s. 2A. Since the tax is based on the credit for state death taxes allowable on the federal estate tax return, taxes that would otherwise be paid to the federal government will be paid to Massachusetts.

#### **Massachusetts Filing Requirements**

The executor of a nonresident decedent who owned or transferred real estate or tangible personal property located in Massachusetts must file a Massachusetts Nonresident Estate Tax Return and Domicile Affidavit (Form M-706NR) if a federal estate tax return (U.S. Form 706) is required to be filed.

For purposes of the Massachusetts estate tax, an executor is defined as the executor or administrator of the decedent's estate, or, if there is no executor or administrator appointed, qualified and acting within the Commonwealth, then any person in actual or constructive possession of any property of the decedent. M.G.L. c. 65C, s. 6(a).

A nonresident decedent is one who was not domiciled in Massachusetts at the time of his or her death. **Domicile** is the place which is an individual's true, fixed and permanent home, determined by established common law principles, and the facts and circumstances in each case. 830 CMR 65C.1.1(1). Determination of domicile, especially the acquisition of a new domicile, often requires the analysis of many factors including, but not limited to, those raised by the domicile affadavit. Executors filing Form M-706NR should attach a memorandum of fact and law if there is substantial doubt as to whether the decedent was a nonresident. Special rules apply for citizens and noncitizens who are nonresidents of the United States and have property taxable in Massachusetts: contact the Estate Tax Unit for instructions as Form M-706NR is not applicable to these estates.

#### **Due Dates and Extensions**

The Massachusetts estate tax return and payment must be filed within nine months after the date of the decedent's death. An executed copy of the federal estate tax return, U.S. Form 706, must be filed with this return. Extensions of time to pay (Form M-4768A) and file (Form M-4768) must be requested prior to the due date. If extensions have been granted, attach copies of Form M-4768 and/or Form M-4768A to the Form M-706NR when filing.

#### **Payment of Tax**

The estate's executor signing the return is personally liable for payment of any tax shown on the return if it is not otherwise paid. The return and the tax payment should be sent to the Massachusetts Estate Tax Unit, PO Box 7023, Boston, MA 02204.

#### **Penalties and Interest**

Interest on any unpaid tax accrues from the original due date of the return. The penalty for failure to file Form M-706NR by the due date, or within an authorized extension of time, is 1% per month (or fraction thereof) to a maximum of 25% of the tax as finally determined to be due. The penalty for failure to pay the tax reported as due on Form M-706NR, by the due date, or within an authorized extension of time, is ½% per month (or fraction thereof) to a maximum of 25%.

#### **Report of Federal Estate Tax Changes**

An amended M-706NR must be filed within 2 months of receipt of a final determination (for example, the federal closing letter, agreed upon federal audit charges, agreed upon IRS Appeals Office changes, Tax Court decision, etc.) of federal estate tax change. Attach a copy of the final federal determination and pay any additional Massachusetts estate tax due as a result of the change. If a refund is indicated as a result of the federal estate tax change and a Massachusetts Estate Tax Closing Letter has previously been issued, in addition to this form, an Application for Abatement (Form CA-6) must be filed within one year of receipt of the final federal determination.

#### **Massachusetts Estate Tax Lien on Real Estate**

The Commonwealth automatically acquires a lien against all Mass-achusetts real estate includible in a decedent's gross estate. Unless the tax is paid in full, the lien is valid for 10 years from the decedent's date of death. M.G.L. c.65C, s. 14.

## Release of Lien — Massachusetts Filing Requirement

When a Massachusetts Nonresident Estate Tax Return is required to be filed to obtain a release of this lien, an executor must file Form M-706NR. The filing must be accompanied by Form M-792, Certificate Releasing Massachusetts Estate Tax Lien, completed in triplicate, a copy of the recorded deed or certificate of title that created the decedent's interest and an executed copy of the federal estate tax return, U.S. Form 706.

When a sale of real estate or a mortgage commitment is pending, the Estate Tax Unit will expedite the release of estate tax lien. The estate may request the release of lien on Form M-4422, Application for Release of Estate Tax Lien, if (1) the date for filing the estate tax return has not yet passed, and (2) Form M-706NR cannot be completed prior to the date of the sale, and (3) a Massachusetts estate tax will be due.

## Release of Lien — No Massachusetts Filing Requirement

If a Massachusetts Estate Tax Return is not required to be filed because the size of the estate does not equal or exceed the federal filing threshold, an affidavit of the executor, subscribed to under the pains and penalties of perjury, recorded in the registry of deeds, and stating that the gross estate of the decedent does not necessitate the filing of a federal estate tax return will release the lien.

For further information, see Technical Information Release 98-14, Release of Estate Tax Lien on Real Estate for Dates of Death on or after January 1, 1997.

#### **Line by Line Instructions**

**Line 1.** Enter the total value of the decedent's gross estate for federal estate tax purposes from U.S. Form 706, page 1, line 1. Do **not** reduce the gross value by the amount of any property subject to a power of appointment upon which an inheritance tax on future interests has been settled and paid pursuant to M.G.L. c. 65, s. 14.

Line 2. Enter the maximum state death tax credit allowable for federal estate tax purposes from U.S. Form 706, page 1, line 15.

#### **Estate Tax Information**

For further estate tax information, please call (617) 887-MDOR or (800) 392-6089.